UNITED STATES DISTRICT COURT

District of Minnesota

Richard D. Sletten, Clerk

Warren E. Burger Federal Building and U.S. Courthouse 316 North Robert Street Suite 100 St. Paul, MN 55101 (651) 848-1100

U.S. Courthouse 300 South Fourth Street Suite 202 Minneapolis, MN 55415 (612) 664-5000 Gerald W. Heaney Federal Building and U.S. Courthouse and Customhouse 515 West First Street Suite 417 Duluth, MN 55802 (218) 529-3500 U.S. Courthouse 118 South Mill Street Suite 212 Fergus Falls, MN 56537 (218) 739-5758

ATTORNEY RE-REGISTRATION AFFIDAVIT

I,	, do hereby certify th	at I am a membe	er in good standing of the Minneso	ota
State Bar, I am present	ly eligible to practice before the	ne Minnesota Su	preme Court, and that my firm na	me,
address, e-mail, and ph	none number (check one of the	following):		
G were curre	ent and accurate as contained in	n the ECF databa	ase of the U.S. District Court for the	he
	ct of Minnesota as of, or updated on in the ECF database of the U.S. District Court for the			
G were updated on in the		ne ECF database	of the U.S. District Court for the	
	Minnesota as noted in the table			
G are provide	ed in the table below (check her	re if you do not ha	ve an ECF login and password and	
provide you	ar current contact information in t	he table below):		
Attorney Name:				
MN Bar ID:				
Law Firm Name:				
Street Address				
Street Huaress				
City, State Zip				
City, State Zip			I	
Phone	() -	Fax	() -	
E-mail				
Please provide any chang	ges you made in ECF. Thank you	.!		
I have verified	or updated my contact inform	ation in ECF and	d enclosed a check for \$40.00 as r	nv
fee for the 2009 re-regi				-5
Č				
			en faxed this affidavit along with	my
credit card authorization	on form for the \$40.00 fee for t	he 2009 re-regis	tration to 612-664-5033.	
Attorney's Original Signa	ature	Date		
Tittorney & Originar Signe		Bute		
Please return Affidavit	with \$40.00 re-registration fee t	to: Clerk, U.S. Di	strict Court	
			y Re-Registration	
			urth Street, Suite 202	
Thank you!		Minneapolis, I	MN 55415	
NOTE: If you would like a reco	eipt, please enclose a self-addressed stam	ped envelope, otherwis	se, no receipt will be issued.	